FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE



FORM

DISCLOSURE SUMMARY PAGE	GĘ		DR-2 DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Organization Committee NAME (Must be same as on Statement of Organization Committee by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Cand Political Subdivision Candidate (8) County PAC (9) City PAC (10) Subdivision PAC (11) Local Ballot Issue CANDIDATE COMMITTEES ONLY: Candidate Name Office Sought Late reports are subject to possible civil and criminal penalties. Purs	2) State PAC (3) State Party idate (7) School Board or Other Political Political Party (if applicable) District (if Senate or House)	Co Co Au	DR-2 PISCLOSURE PREPORT PRE
the candidate, for a candidate's committee, and the chairperson, for individual responsible for filing timely and accurate reports. SIGNATURE OF PERSON FILING REPORT	any other type of committee, is to the state of the state	he ATOS	5-15-08 DATE SIGNED
(report date) CHECK IF AMENDMENT TO REPORT DATED Check if this is final (termination) report and attach Notice of Disso (You must continue to file reports until a DR-3 is filed.)		# 1 Local Comm	nittees, enter Date of Election
CASH ON HAND at the beginning of the reporting period. (Total of al	Γ OF CASH ON HAND I funds held by the		
committee. This amount MUST be the same as the cash or of the last reporting period or must be zero if this is first re	n hand at the end	\$	2269.04
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedule A)	(*also see in-kind below)		1042.75
Schedule F: Loans Received total (Attach Schedule F)			
Schedule H: Total Sales of Campaign Property (Attach Sch	edule H)	•••••	
(Schedule H applies to Candidates' Committee	ees Only) SUB-TOTAL	\$	3311.79
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	daha d		765.10
Schedule B: Expenditures total (Attach Schedule B) (**als	•		/03.10
Schedule F: Loan Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report bala be zero) (Attach DR-3)	ance must		2546.69
*UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)			
*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)			
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES NO
ANDIDATE COMMITTEES ONLY:			
ALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Sched	dule H)	\$	·
TATE COMMITTEES: Submit a reconciled campaign account bank	statement in January of each ve	ar.	

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

PAGE COUNTY REPUBLICAN PARTY

SCHEDULE	
A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1/24/08	ID# CK#	Caucus Envelope Donations		\$830.00	
3/10/08	ID# CK#	Convention Donations		212.75	
	ID#				
	ID# CK#				
· · · · · · · · · · · · · · · · · · ·			SUB-TOTAL	.10/0 7	

TOTAL (if last page of this schedule)

\$1042.7

Page ____ of ____

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)

PAGE COUNTY REPUBLICAN PARTY

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
3/8/2008	ID# CK# 1113	Jackie Brabec Shenandoah, Ia 51601	Supplies for Convent	lon 85.10
3/10/08	ID# CK# 1114	Republican Party of Des Moines, Ia	Iowa Delegates	680.00
	ID#			
	СК#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	СК#			
	ID#			
	СК#			
	ID#			
]	СК#			
			SUB-TOTAL	\$ 765.10

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page	of	

TOTAL (if last page of this schedule)

765.10